MARYLAND ADVISORY COUNCIL ON MENTAL HYGIENE/ PL 102-321 PLANNING COUNCIL

Minutes

May 15, 2012

<u>Maryland Advisory Council Members:</u> M. Sue Diehl, Chair; Mike Finkle, Livia Pazourek, Charles Reifsnider

Maryland Advisory Council Members Absent: Richard Blair, Jaimi L. Brown, Michele Forzley, Joshana Goga, Edwin C. Oliver, Robert M. Pender, Vice-Chair; John Scharf, Anita Solomon, Anthony Swetz, Jr., Robert Turner, Sherrie Wilcox

Individuals highlighted as such are resigned members who have not yet been replaced.

<u>PL 102-321 Council Members Present</u>: Gerald Beemer, Naomi Booker, Tracee Bryant, Sarah Burns, Coordinator; Herb Cromwell, Kate Farinholt, Duane Felix for William Manahan, Vira Froehlinger, A. Scott Gibson, Victor Henderson, Michael Ito, Julie Jerscheid, George Lipman, Dan Martin, Cynthia Petion, Kathleen Ward, Phoenix Woody

<u>PL 102-321 Council Members Absent:</u> Lynn Albizo, Carol Allenza, T.E. Arthur, Peter Cohen, Chicquita Crawford, Catherine Drake, R. Terence Farrell, Gerri Gray, Diane Herr, Cindy Kauffman, Michael Lang, Sharon Lipford, Coordinator; Joanne Meekins, Jacqueline Powell, Linda Raines, Sarah Rhine, Sheryl Sparer, Jane Walker

MHA Staff Present: Daryl Plevy, Robin Poponne, Iris Reeves

<u>Guests and Others</u>: Dennis McDowell, Own Our Own of Montgomery County; John Turner, Dorchester Hospital; Jackie Pettis, ValueOptions; Miriam Yarmolinsky, Peer Wellness and Recovery Services; Scott Thomas, Cannon Design

INTRODUCTIONS/ADOPTION OF MINUTES:

The meeting was called to order by Council Chair, Sue Diehl. Attendees introduced themselves and the draft minutes of the April 17, 2012 meeting were approved. Please note that the approved minutes will be posted on the Mental Hygiene Administration's (MHA) Web site. www.dhmh.maryland.gov/mha. The Maryland Advisory Council on Mental Hygiene's link is listed under "Resources".

ANNOUNCEMENTS:

- Cynthia Petion expressed gratitude for the representation of the Joint Council at the MHA Stakeholders' Meeting to develop the FY 2013 State Mental Health Plan. The meeting was held at Temple Oheb Shalom on April 27, 2012. Approximately 70 people participated in the annual State mental health plan process/activity. Representatives included consumer, family and provider organizations, local and state agencies, mental health/substance abuse providers, and CSA directors. The group activities included discussion of the DHMH Seven Principles of Integrated Care. Each group identified at least three recommendations to support or enhance current or upcoming efforts. The next steps include work by MHA staff to update and/or re-write strategies based on current priority issues, behavioral health integration activities and the recommendations. Additionally, the Planning Committee of the Joint Council will need to meet to review the draft FY 2013 document. A "hold the date" notice will be forthcoming.
- Mike Finkle announced the On Our Own of Maryland's Annual Statewide Consumer Conference will take place June 7-8 at Rocky Gap Lodge in Flintstone MD. The theme is "The Tao (Chinese word for way or path) of Possibilities". The keynote address will be given by Mary Blake from SAMHSA and mental health consumers are invited to submit their personal stories of recovery by May 18th. For more information please call 410-646-0262, 1800-704-0262, or email: ooomd@earthlink.net.
- Kate Farinholt encouraged all to participate in the upcoming NAMIWalks on May 19th at the Inner Harbor. The first NAMIWalks event was in Silver Spring, MD on May 6th and it was a successful event. For additional information, please contact: Karin Hack, NAMI Maryland at 410-884-8691**or email** khack@namimd.org.

DHMH DEPUTY SECRETARY REPORT:

Renata Henry, Deputy Secretary for Behavioral Health and Disabilities provided an update on the Department's Behavioral Health Integration process. Patrick Dooley, Chief of Staff, was called to another meeting and was unable to attend. On his behalf, Ms. Henry announced that Mr. Dooley has been charged to lead the effort to integrate the Mental Hygiene Administration and the Alcohol and Drug Abuse Administration into a single Behavioral Health Administration within DHMH.

Ms. Henry reported that during 2011 several planning activities have been underway at DHMH which have included working with consultants to review available data and making recommendations on potential financing alternatives and model. The Department submitted a report to the Maryland General Assembly regarding the next steps in the integration process and the Secretary indicated a proposal would be developed by September 30, 2012. Over the next few months the department will continue to seek broad public input toward the choosing of a behavioral health integration model for the state through workgroups and larger stakeholder meetings. The following Workgroups were created to help inform the process for selecting a financing/integration model:

- 1. Systems Linkage
- 2. State/Local and Non-Medicaid
- 3. Evaluation an Data: and
- 4. Chronic Health Homes

Additionally, the three proposed models are as follows:

- Model 1 Protected Carve-In: Medicaid-financed behavioral health benefits would be managed by Medicaid managed care organizations (MCOs) through a "protected carve-in".
- Model 2 Risk-Based Service Carve-Out: Medicaid-finance specialty behavioral health benefits (substance use and mental health) would be managed through a risk-based contract with one or more Behavioral Health Organizations (BHO); and
- Model 3 Risk-Based Population Carve-Out: As in Model 1, all Medicaid-financed behavioral health benefits and general medical benefits would be delivered under a comprehensive risk-based arrangement.

Joint Council members are encouraged to give input, join the larger stakeholder meetings and/or join workgroups. All are invited to stay up-to-date regarding Maryland's behavioral health integration efforts at www.http://dhmh.maryland.gov/bhd/SitePages/integrationefforts.aspx. Additionally, Ms. Henry encouraged the Joint Council to explore efforts to establish a Behavioral Health Advisory Council. This may involve inviting representatives of the Maryland State Drug and Alcohol Abuse Council to a Joint Council meeting to begin a discussion on a plan to unify once the two Administrations merge. Cynthia Petion, MHA and the ADAA staff support will be meeting in June to discuss the legislative statutes and responsibilities of each Council.

PRESENTATION: CANNON DESIGN PROGRESS UPDATE – Maryland Department of Health and Mental Hygiene (DHMH) and Mental Hygiene Administration (MHA): Future Demand for State-Operated Psychiatric Hospitals – Scott Thomas

Cannon Design is the vendor selected by DHMH and MHA to conduct an independent study to assess the future demand, hospital capacity and best practices for State-owned psychiatric hospitals. Scott Thomas, facilitated the presentation and other representatives of Cannon Design participated by telephone conference. Mr. Thomas reported that the study/project is divided into four phases of work over 22 weeks.

Phase 1 – Current State Assessment (April 2012)

Phase 2 – Future Psychiatric Consumer Experience (May 2012)

Phase 3 – Initial Strategies and Recommendations (June 2012); and

Phase 4 – Final Recommendations (July 2012).

In April and May, Cannon Design conducted interviews, which included Joint Council representatives. Individuals/groups were asked their perceptions on systems' gaps and issues, as well as trends in consumer population. Based on the interviews the perceptions in best practices included:

- Self-Directed Care
- Peer Support/Wellness Recovery Action Plan (WRAP)
- Hospital Diversion efforts
- Crisis Teams
- Evidence-Based Practices
- Integration of Care development efforts
- Public and Academic Partnerships
- Housing Initiatives
- Alternative Funding approaches

Perceptions in system gaps include:

- Key components of prevention should be expanded, including social systems and supported employment and housing; and
- Fragmented care continuum leaves gaps in community services

During the meeting, it was noted that the Cannon Design presentation lacked input from the Judiciary perspective and it was recommended that Cannon Design include feedback/comments before a final report on recommendations is issued. Due to other discussions and interests generated by the overview of stakeholders' perceptions, Cannon Design presenters ran out of time during their presentation. In an effort to further solicit feedback on key questions of the study, the Joint Council members would receive via email or regular mail, the presentation which will include additional questions. The Council was asked to review and quickly turnaround responses to questions Cynthia Petion, who will pass on to Cannon Design and MHA staff. Council members were also invited to attend the Phase 2 – Progress Report meeting on May 18, 2012 at 10. If anyone is interested in attending, please RSVP to Ms. Petion.

COUNCIL BUSINESS:

Sue Diehl announced that members of the Nominating Committee (Mike Finkle, Chair; Anita Solomon and Terry Farrell) had identified the slate of officers for FY 2013-14. The slate is as follows: Sarah Burns, Chair; Sue Diehl, Vice Chair; Carol Allenza, Planning Coordinator; and T. E. Arthur, Planning Coordinator. At the June meeting the Joint Council will vote on the slate of Officers. Ms. Diehl thanked the Nominating Committee for their time and efforts.

The meeting was adjourned. The Executive/Planning Committee did not meet.

Please note, the Agenda for the July 17th Council meeting will be posted on the Advisory's Council's web page, under the resources section, on MHA's Web site www.dhmh.maryland.gov/mha.